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Image#,29934492845CATION OF MULTICANDIDATE STATUS

(See reverse side for instructions) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL Sarah PAC (b) Number and Street Address PO Box 7711 2. FEC IDENTIFICATION NUMBER C00458588 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY Arlington VA 22207 X OTHER I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Name Office Sought State/District **Date** (i) 07/14/2009 Lindsey Graham Senate SC 00 (ii) John McCain 00 06/23/2009 Senate ΑZ (iii) Lisa Murkowski Senate ΑK 00 06/07/2009 (iv) Orrin Hatch 07/14/2009 Senate UT 00 (v) Rob Portman OH 00 07/14/2009 Senate (b) Contributors: The committee received a contribution from its 51st contributor 01/28/2009 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 01/26/2009 (d) Qualification: The committee met the above requirements on: I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER DATE SIGNATURE OF TREASURER Electronically Filed by **Timothy Crawford** 08/28/2009 **Timothy Crawford** Text ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact:

Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

Revised 1/2001

FEC FORM 1 M